TRANSMITTAL FORM (to be used for all correspondence after initial for	no persons are required to respond to a colle Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	PTO/SB/21 (08-03) Approved for use through 08/30/2003. OMB 0651-0031 tent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ction of information unless it displays a valid OMB control number. 10/615,344 July 8, 2003 Edward Jonathan Brush 3629 2502985-991100
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Ad Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks The Commissioner is authorized to chof fees to Deposit Account No. 07-189 Customer No. 29585	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Return-Receipt Postcard; Copies of 3 references;
Firm or Individual name David L. Alberti, Reg. No. Gray Cary Ware & Freider 153 Townsend Street Suit Date CE	ERTIFICATE OF TRANSMISSIC elope addressed to: Commissioner for I	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

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FEE	TRA	NS	MI	TT	AL
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 754.00	1
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С	mplete if Kn wn
Application Number	10/615,344
Filing Date	July 8, 2003
First Named Inventor	Edward Jonathan Brush
Examiner Name	
Art Unit	3629
Attorney Docket No.	2502985-991100

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
Check Credit card Money Other None					
Deposit Account:	Large Entity Small Entity				
Denosit	Fee Fee Fee Fee Description Code (\$) Code (\$)	ee Paid			
Account Number Gray Cary Ware & Freidenrich, LLP	1051 130 2051 65 Surcharge - late filing fee or oath				
Deposit Account 07-1896	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet				
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification				
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to				
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action				
to the above-identified deposit account.	1251 110 2251 55 Extension for reply within first month				
FEE CALCULATION	1252 420 2252 210 Extension for reply within second month				
1. BASIC FILING FEE Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month				
Fee Fee Fee Fee Description Fee Paid	1254 1,480 2254 740 Extension for reply within fourth month				
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month				
1001 770 2001 365 Offing file 385	1401 330 2401 165 Notice of Appeal				
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filing a brief in support of an appeal				
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 385	1452 110 2452 55 Petition to revive - unavoidable				
	1453 1,330 2453 665 Petition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	1501 1,330 2501 665 Othiny issue fee (or reissue)				
Extra Claims below Fee Paid Total Claims 49 -20** = 20 x 9 = 261	71				
Total Claims	1503 640 2503 320 Plant issue fee				
Claims - 3 = 1	1460 130 1460 130 Petitions to the Commissioner				
	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))				
1203 290 2203 145 Multiple dependent claim, if not paid					
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770 2801 385 Request for Continued Examination (RCE)				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application				
Jan. 204	Other fee (specify)				
SUBTOTAL (2) (\$) 304 *Reduced by Basic Filing Fee Paid SUBTOTAL (2) (\$) 65					
**or number previously paid, if greater; For Reissues, see above					

SUBMITTED BY

(Complete (if applicable))

Name (PrinuType)

David L. Alberti

Registration No. (Altorney/Agent)

Signature

(Complete (if applicable))

Telephone 650-833-2052

Date

Date

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